Edgar Filing: ASPYRA INC - Form 4

| ASPYRA IN | IC | | | | | | | | | | | |
|---|--|--------------------|--|--|-------------|---|-----------------------------|---|--|--|-----------|--|
| Form 4 | | | | | | | | | | | | |
| November 24 | 4, 2008 | | | | | | | | | | | |
| FORM | 1 4 | | | | | | | | | | PPROVAL | |
| | UNITED | STATES | | | | ND EX(D.C. 205 | | NGE (| COMMISSION | OMB Number: | 3235-0287 | |
| Check this box if no longer subject to STATEMENT OF CHANC | | | | GES IN BENEFICIAL OWNERSHIP OF SECURITIES | | | | | Expires: Estimated a | | | |
| Section 1 Form 4 o Form 5 obligation may cont <i>See</i> Instru 1(b). | r Filed pu ^{ns} Section 17 | (a) of the | | 6(a) of t ility Ho | the oldi | Securiti | pany | Act of | e Act of 1934, f 1935 or Sectio 40 | burden hou response n | • | |
| (Print or Type F | Responses) | | | | | | | | | | | |
| Pruter Robert M. Symbol | | | | er Name and Ticker or Trading | | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Last) | | | | Earliest Transaction | | | | | (Check all applicable) | | | |
| (Month/Da 26115-A MUREAU RD. 11/21/20 (Street) 4. If Amer | | | (Month/Day/Year) 11/21/2008 | | | | | | Director 10% Owner X_ Officer (give title Other (specify below) below) Senior Vice President, Sales | | | |
| | | | mendment, Date Original Month/Day/Year) | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | | |
| CALABAS | AS, CA 91302 | | | | | | | | Form filed by M Person | Iore than One Re | eporting | |
| (City) | (State) | (Zip) | Table | e I - Non | -De | erivative S | Securi | ties Acc | uired, Disposed of | f, or Beneficial | lly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Da (Month/Day/Year |) Execution any | med on Date, if Day/Year) | Code (Instr. 8 | 3) | 4. Securit n(A) or Di (D) (Instr. 3, Amount | spose 4 and (A) or | d of | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | |
| Common Stock | 11/21/2008 | | | Р | | 2,000 | А | \$ 0.28 | 2,000 | D | | |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

Edgar Filing: ASPYRA INC - Form 4

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transactic Code (Instr. 8) | 5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Secur | ınt of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr |
|---|---|---|---|--|---|---------------------|--------------------|-------|--|---|--|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Addro | ess | Relationships | | | | | | | |
|---|------------|---------------|------------------------------|-------|--|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | | |
| Pruter Robert M. 26115-A MUREAU RD. CALABASAS, CA 91302 | | | Senior Vice President, Sales | | | | | | |
| Signatures | | | | | | | | | |
| Robert M. Pruter | 11/24/2008 | | | | | | | | |

<u>**</u>Signature of Reporting Person Date

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.